

No. <b>C 120455</b>		<b>Due no later than Aug 31, 2018</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		<b>1. Mailing Address: Correct in this box if needed.</b>  ADA CANYON MEDICAL EDUCATION CONSORTIUM, INC. MAYRA RUIZ 305 W. JEFFERSON STREET BOISE ID 83702-6047		MAYRA RUIZ 305 W JEFFERSON ST BOISE ID 83702-6047			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors, Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	MARION COOK, MD	777 N. RAYMOND STREET	BOISE	ID	USA	83704	
DIRECTOR	SAMANTHA PORTENIER, MD	315 EAST ELM STREET SUITE 100	CALDWELL	ID	USA	83605	
DIRECTOR	DARCIE LEVENSON, PA-C	3399 E. LOUISE DRIVE SUITE 100	MERIDIAN	ID	USA	83642	
DIRECTOR	FRANK BATCHA, JR., MD	1450 AVIATION DRIVE	HAILEY	ID	USA	83333	
PRESIDENT	SUZANNE ALLEN, MD	322 E. FRONT STREET, #442B	BOISE	ID	USA	83702	
DIRECTOR	DAVID NIELSEN, MD	4840 N. CLOVERDALE ROAD	BOISE	ID	USA	83713	
DIRECTOR	NEIL ARGYLE, MD, MPH	500 W. FORT STREET	BOISE	ID	USA	83702	
DIRECTOR	MAYRA RUIZ	305 W. JEFFERSON STREET	BOISE	ID	USA	83702	
TREASURER	TIMOTHY DEBLIECK, MD	777 N. RAYMOND STREET	BOISE	ID	USA	83704	
DIRECTOR	APRIL DILLION, DO	300 W. MYRTLE STREET SUITE 100	BOISE	ID	USA	83702	
DIRECTOR	W. MARK ROBERTS, MD, MMM	190 E. BANNOCK STREET WGP, PLAZA II, SUITE 100	BOISE	ID	USA	83712	
5. Organized Under the Laws of:  <b>ID</b> <b>C 120455</b>		6. Annual Report must be signed.*  Signature: Mayra Ruiz Name (type or print): Mayra Ruiz					
		Date: 08/30/2018 Title: Director, ACMEC					

Processed 08/30/2018

\* Electronically provided signatures are accepted as original signatures.